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REPORT OF RECEIPTS

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FOI All Additionzed Committee					Office Use Only			
NAME OF COMMITTEE (in	TYPE OR PRIN	IT ▼	Example: If typin over the lines.	g, type	12FE4M5			
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Check if dit than previous reported. (A	usly FAIRBANKS				AK L9	9701		
2. FEC IDENTIFIC	CATION NUMBER ▼	CITY A	\		STATE A	ZIP CODE	A	
C C0052273	30	3. IS THIS REPORT	NEW (N)	OR	AMENDI (A)		DISTRICT	
(a) Quarterly R	5 Quarterly Report (Q1)	(b) 12-Day P	RE-Election Repo)	General (12	•	off (12R)	
Octobe	Quarterly Report (Q2)	Election	on	D D		in the State of	المحدد المحد المحدد المحدد	
January	y 31 Year-End Report (YE)	(c) 30-Day P	POST-Election Rep	port for the	:	F-0		
			General (300	i) {	Runoff (30l	R) 🔲 Spe	ecial (30S)	
Termina	ation Report (TER)	Election	5 4	, [0 0] /	A A A A A A	in the State of	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
5. Covering Period	04 / 01	2013	through	M M M	/ D D / 30	2013		
I certify that I have e	examined this Report and t	to the best of my	/ knowledge and	belief it is t	rue, correct and	complete.		
Type or Print Name Signature of Treasure		V. la	d (my		Date 6	1'[3]'[2	013	
NOTE: Submission of	false, erroneous, or incomp	lete information m	nay subject the per	rson signing	this Report to th	e penalties of 2 U.S	S.C. §437g.	
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